

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

MATTHEW 25 NETWORK

ADDRESS (number and street)

25 E STREET NW SUITE 200

Check if different  
than previously  
reported. (ACC)

WASHINGTON

DC

20001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00449801

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Quarterly Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
**PRE-Election**  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

10

01

2008

through

11

24

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

MARA VANDERSLICE

Signature of Treasurer

Electronically Filed by MARA VANDERSLICE

Date

12

04

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
MATTHEW 25 NETWORK

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period .....	21774.75	
(c) Total Receipts (from Line 19) .....	36501.08	180610.58
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	58275.83	180610.58
7. Total Disbursements (from Line 31) .....	37173.36	159508.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21102.47	21102.47
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	15415.62	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
MATTHEW 25 NETWORK

Report Covering the Period:

From:

M M D D Y Y W Y  
1 0 0 1 2 0 0 8

To:

M M D D Y Y W Y  
1 1 2 4 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	16050.00	109679.00
(i) Itemized (use Schedule A) .....	14451.08	49907.21
(ii) Unitemized .....	30501.08	159586.21
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	6000.00	21000.00
(c) Other Political Committees (such as PACs) .....	36501.08	180586.21
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	24.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.37
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	36501.08	180610.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	36501.08	180610.58

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	24777.54	101763.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	24777.54	101763.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	12395.82	57744.16
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	37173.36	159508.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37173.36	159508.11

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	36501.08	180586.21
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	36501.08	180586.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	24777.54	101763.95
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	24.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24777.54	101739.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Alison Baldwin

Mailing Address 1415 E. 54th Place

City

Chicago

State

IL

Zip Code

60615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Opinion Research  
Center

Occupation  
Statistician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.6232

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Alison Baldwin

Mailing Address 1415 E. 54th Place

City

Chicago

State

IL

Zip Code

60615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Opinion Research  
Center

Occupation  
Statistician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.6609

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Boswell

Mailing Address 906 Pine Marsh Drive

City

Brunswick

State

GA

Zip Code

31525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cunningham Jewelers

Occupation  
Book-keeper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.6260

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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PAGE 7 / 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Jonathan Bradford

Mailing Address 1247 Bates SE

City

Grand Rapids

State

MI

Zip Code

49506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Inner City Christian Fed.

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6622

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Joyce Brayboy

Mailing Address 1322 Half Street, SW

City

Washington

State

DC

Zip Code

20024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Glover Park Group

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.6679

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

David Castagnetti

Mailing Address 1341 G Street, NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mehlman Vogel Castagnetti

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6626

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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PAGE 8 / 39

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NAME OF COMMITTEE (In Full)  
**MATTHEW 25 NETWORK**

**A.**

Full Name (Last, First, Middle Initial)  
 Brenda Coleman

Mailing Address 8425 Lazy Creek Court

City State Zip Code  
Springfield VA 22153

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Polsinelli PC

Occupation  
 Legislative Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6180

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
 James Cregan

Mailing Address 6715 29th St., N.

City State Zip Code  
Arlington VA 22213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Magazine Publishers of America, Inc.

Occupation  
 Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6166

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
 John Dalton

Mailing Address 3710 University Avenue, NW

City State Zip Code  
Washington DC 20016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Retired Secretary of the Navy

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6630

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

John Dalton

Mailing Address 3710 University Avenue, NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired Secretary of the  
Nave

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6632

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Tom Daschle

Mailing Address 2830 Foxhall Rd., NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alston & Bird

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.6671

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Julian Epstein

Mailing Address 2328 Champlain Street, NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Law Media Group

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6633

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Lauri Fitz-Pegado

Mailing Address 3401 38th Street, NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Livingston Group

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6635

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Scott Garber

Mailing Address 725 K St NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self-employed

Occupation  
writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6637

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Everett Gendler

Mailing Address 264 Monument Valley Rd

City

Great Barrington

State

MA

Zip Code

01230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Rabbi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.6288

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 39

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)  
richard hall

Mailing Address 262 mott street  
apt 505

City State Zip Code  
nyc NY 10012

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
music

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.6484

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Kara Holden

Mailing Address 4231 Tujunga Ave #D

City State Zip Code  
Studio City CA 91604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6158

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Alethia Jackson

Mailing Address 523 Somerset Place, NW

City State Zip Code  
Washington DC 20011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
America's Health Insurance  
Plans

Occupation  
Federal Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6642

Amount of Each Receipt this Period

750.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Broderick D. Johnson

Mailing Address 5901 NW Nebraska Ave

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bryan Cave Strategies

Occupation

President, Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6643

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

David Keyes

Mailing Address 1045 Mason Street #502

City

San Francisco

State

CA

Zip Code

94108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unitarian Church

Occupation

minister

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.6540

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Carlisle Levine

Mailing Address 509 B 5th Street, NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARE

Occupation

International Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6647

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Waldo McMillan

Mailing Address 4810 Stilton Ct.

City

Upper Malboro

State

MD

Zip Code

20772

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bryan Cave Strategies

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6649

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mindy Miller

Mailing Address 130 W. 20th Street

City

Holland

State

MI

Zip Code

49423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.6673

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Nancy Miller

Mailing Address 140 E. 29th Street

City

Holland

State

MI

Zip Code

49423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6651

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

1050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Jesse Mishler

Mailing Address 11559 Bertram Street

City

Woodbridge

State

VA

Zip Code

22192

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carr Realty Partners

Occupation

Finance Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6654

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

wesley murphy

Mailing Address 2330 chislehurst dr.

City

los angeles

State

CA

Zip Code

90027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
attorney

Occupation

retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.6104

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Matthew Newell-Ching

Mailing Address 6815 N Vancouver Ave

City

Portland

State

OR

Zip Code

97217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bread for the World

Occupation

Regional Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.6111

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

James Rosapepe

Mailing Address 1828 L Street, NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Maryland

Occupation

State Senator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6659

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Sara Rosenquist

Mailing Address 417 Overland Drive

City

Chapel Hill

State

NC

Zip Code

27517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.6108

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

James Salt

Mailing Address 4021 9th Street NW #406

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholics United

Occupation

Communications Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.6321

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Stephen Schneck

Mailing Address 9707 Hill Street

City

Kensington

State

MD

Zip Code

20895

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.6443

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Maureen Shea

Mailing Address 505 A St SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Episcopal Church

Occupation  
Director of Government Religion

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6661

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Janine Smith

Mailing Address 310 Opera Ct

City

Silver Spring

State

MD

Zip Code

20901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.6133

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Pamela Smith

Mailing Address 2014 Tunlaw Rd, NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Senate

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6662

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Jennifer Stewart

Mailing Address 1780 Potomac Greens Drive

City

alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bryan Cave Strategies

Occupation  
Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6171

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Jennifer Stewart

Mailing Address 1780 Potomac Greens Drive

City

alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bryan Cave Strategies

Occupation  
Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6178

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Amy Tejral

Mailing Address 1210 R Street NW #209

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Avenue Solutions

Occupation  
Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6169

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Ronald Tompkins

Mailing Address 81-05 35th Avenue #2K

City

Jackson Heights

State

NY

Zip Code

11372

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community Churh

Occupation  
Clergy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.6256

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Craig Whipps

Mailing Address 2102 Mustang Lane

City

Arcata

State

CA

Zip Code

95521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
craigw5@suddenlink.net

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6174

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Courtenay White

Mailing Address 10695 W 17th Ave

City

Lakewood

State

CO

Zip Code

80215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation

not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.6186

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Carmencita Whonder

Mailing Address 3900 16th Street, NW

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brownstein Hyat Farber Sc-  
hreck

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6668

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Margaret Zeigler

Mailing Address 1120 N. Pitt Street

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Congressional Hunger Cent-  
er

Occupation

Deputy Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.6309

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

16050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 39

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

FEDERAL EXPRESS POLITICAL ACTION COMMITTEE

Mailing Address 942 South Shady Grove Road

City

Memphis

State

TN

Zip Code

38120

FEC ID number of contributing  
federal political committee.

**C** C00068692

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 8

Transaction ID: SA11C.6681

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

ROCKY MOUNTAIN PAC

Mailing Address 607 14th Street NW Suite 800

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00409128

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11C.6615

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

6000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)  
Alaska Air

Mailing Address PO Box 24948

City State Zip Code  
Seattle WA 98124

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.6720

Date of Disbursement

/   /

Amount of Each Disbursement this Period

319.00

**B.**

Full Name (Last, First, Middle Initial)  
Amtrak

Mailing Address 60 Massachusetts Ave, NE

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.6709

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.00

**C.**

Full Name (Last, First, Middle Initial)  
Amtrak

Mailing Address 60 Massachusetts Ave, NE

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.6711

Date of Disbursement

/   /

Amount of Each Disbursement this Period

45.00

**SUBTOTAL** of Disbursements This Page (optional) .....

428.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

<b>A.</b> Full Name (Last, First, Middle Initial) Amtrak	<b>Transaction ID:</b> SB21B.6716 <b>Date of Disbursement</b>
Mailing Address 60 Massachusetts Ave, NE	<div> <div><sup>M</sup>1</div> <div><sup>M</sup>0</div> <div>/</div> <div><sup>D</sup>1</div> <div><sup>D</sup>6</div> <div>/</div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>8</div> </div>
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel	<div>63.00</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) AT&T Moblie	<b>Transaction ID:</b> SB21B.6739 <b>Date of Disbursement</b>
Mailing Address PO Box 536216	<div> <div><sup>M</sup>1</div> <div><sup>M</sup>1</div> <div>/</div> <div><sup>D</sup>1</div> <div><sup>D</sup>7</div> <div>/</div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>8</div> </div>
City Atlanta State GA Zip Code 30353	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Phone	<div>429.83</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc.	<b>Transaction ID:</b> SB21B.6684 <b>Date of Disbursement</b>
Mailing Address PO Box 390728	<div> <div><sup>M</sup>1</div> <div><sup>M</sup>1</div> <div>/</div> <div><sup>D</sup>2</div> <div><sup>D</sup>4</div> <div>/</div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>8</div> </div>
City Cambridge State MA Zip Code 02139	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Credit Card Processing Charges	<div>723.73</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1216.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Budget Rent-a-Car</p> <p>Mailing Address 6 Sylvan Way</p> <p>City Parsippany State NJ Zip Code 07054</p> <p>Purpose of Disbursement Car Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6690</p> <p>Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 155.07</p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address 1030 Delta Boulevard</p> <p>City Atlanta State GA Zip Code 30320</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6698</p> <p>Date of Disbursement 10 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 553.00</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Google Adwords</p> <p>Mailing Address 1600 Ampitheater Pkwy</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Web Ads-Not Cand. Specific</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6700</p> <p>Date of Disbursement 10 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 500.33</p> <p>Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

1208.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

<b>A.</b> Full Name (Last, First, Middle Initial) Google Adwords	<b>Transaction ID:</b> SB21B.6708 <b>Date of Disbursement</b>
Mailing Address 1600 Ampitheater Pkwy	<div> <div>10</div> <div>15</div> <div>2008</div> </div>
City Mountain View State CA Zip Code 94043	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Web Ads-Not Cand. Specific Candidate Name	<div>531.77</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Google Adwords	<b>Transaction ID:</b> SB21B.6718 <b>Date of Disbursement</b>
Mailing Address 1600 Ampitheater Pkwy	<div> <div>10</div> <div>20</div> <div>2008</div> </div>
City Mountain View State CA Zip Code 94043	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Web Ads-Not Cand. Specific Candidate Name	<div>645.05</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Google Adwords	<b>Transaction ID:</b> SB21B.6719 <b>Date of Disbursement</b>
Mailing Address 1600 Ampitheater Pkwy	<div> <div>10</div> <div>20</div> <div>2008</div> </div>
City Mountain View State CA Zip Code 94043	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Web Ads-Not Cand. Specific Candidate Name	<div>591.31</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1768.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

<b>A.</b> Full Name (Last, First, Middle Initial) Google Adwords	<b>Transaction ID:</b> SB21B.6723 <b>Date of Disbursement</b>
Mailing Address 1600 Ampitheater Pkwy	<div> <div>10</div> <div>21</div> <div>2008</div> </div>
City Mountain View State CA Zip Code 94043	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Web Ads-Not Cand. Specific	<div>505.12</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Google Adwords	<b>Transaction ID:</b> SB21B.6726 <b>Date of Disbursement</b>
Mailing Address 1600 Ampitheater Pkwy	<div> <div>10</div> <div>22</div> <div>2008</div> </div>
City Mountain View State CA Zip Code 94043	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Web Ads-Not Cand. Specific	<div>503.84</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Google Adwords	<b>Transaction ID:</b> SB21B.6727 <b>Date of Disbursement</b>
Mailing Address 1600 Ampitheater Pkwy	<div> <div>10</div> <div>23</div> <div>2008</div> </div>
City Mountain View State CA Zip Code 94043	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Web Ads-Not Cand. Specific	<div>549.11</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1558.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

<b>A.</b> Full Name (Last, First, Middle Initial) Google Adwords	<b>Transaction ID:</b> SB21B.6728 <b>Date of Disbursement</b>																				
Mailing Address 1600 Ampitheater Pkwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	4		2	0	0	8												
City Mountain View State CA Zip Code 94043	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Web Ads-Not Cand. Specific Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Google Adwords	<b>Transaction ID:</b> SB21B.6729 <b>Date of Disbursement</b>																				
Mailing Address 1600 Ampitheater Pkwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	4		2	0	0	8												
City Mountain View State CA Zip Code 94043	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Web Ads-Not Cand. Specific Candidate Name	<table border="1"> <tr> <td colspan="10">25.78</td> </tr> </table>	25.78																			
25.78																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Google Adwords	<b>Transaction ID:</b> SB21B.6730 <b>Date of Disbursement</b>																				
Mailing Address 1600 Ampitheater Pkwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	7		2	0	0	8												
City Mountain View State CA Zip Code 94043	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Web Ads-Not Cand. Specific Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1025.78

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Google Adwords</p> <p>Mailing Address 1600 Ampitheater Pkwy</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Web Ads-Not Cand. Specific</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6736</p> <p>Date of Disbursement  <div> <div>10</div> <div>28</div> <div>2008</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>542.65</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Honey Biscuits</p> <p>Mailing Address PO Box 872</p> <p>City Reisterstown State MD Zip Code 21136</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6712</p> <p>Date of Disbursement  <div> <div>10</div> <div>16</div> <div>2008</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>1940.00</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Network Lobby</p> <p>Mailing Address 25 E Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6743</p> <p>Date of Disbursement  <div> <div>10</div> <div>21</div> <div>2008</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>1300.00</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**3782.65**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
 MATTHEW 25 NETWORK

<b>A.</b> Full Name (Last, First, Middle Initial) Priceline.com	<b>Transaction ID:</b> SB21B.6686 <b>Date of Disbursement</b>
Mailing Address 800 Connecticut Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 1 / 2 0 0 8</div> </div>
City Norwalk State CT Zip Code 06854	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Lodging	<div>145.71</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Priceline.com	<b>Transaction ID:</b> SB21B.6702 <b>Date of Disbursement</b>
Mailing Address 800 Connecticut Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 4 / 2 0 0 8</div> </div>
City Norwalk State CT Zip Code 06854	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Lodging	<div>110.51</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) United Airlines	<b>Transaction ID:</b> SB21B.6685 <b>Date of Disbursement</b>
Mailing Address 77 W Wacker Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 1 / 2 0 0 8</div> </div>
City Chicago State IL Zip Code 60601	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel	<div>234.99</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

491.21

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

<b>A.</b> Full Name (Last, First, Middle Initial) United Airlines	<b>Transaction ID:</b> SB21B.6689 <b>Date of Disbursement</b>																				
Mailing Address 77 W Wacker Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	1		2	0	0	8												
City Chicago State IL Zip Code 60601	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>15.00</td> </tr> </table>	15.00																			
15.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) United Airlines	<b>Transaction ID:</b> SB21B.6691 <b>Date of Disbursement</b>																				
Mailing Address 77 W Wacker Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	3		2	0	0	8												
City Chicago State IL Zip Code 60601	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td>15.00</td> </tr> </table>	15.00																			
15.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) US Airways	<b>Transaction ID:</b> SB21B.6701 <b>Date of Disbursement</b>																				
Mailing Address 400 E. Sky Harbor Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	4		2	0	0	8												
City Phoenix State AZ Zip Code 85034	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td>545.50</td> </tr> </table>	545.50																			
545.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

575.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)  
US Airways

Mailing Address 400 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.6703

Date of Disbursement

10 / 14 / 2008

Amount of Each Disbursement this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)  
MARA VANDERSLICE

Mailing Address 25 E STREET, NW  
SUITE 200

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.6722

Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
MARA VANDERSLICE

Mailing Address 25 E STREET, NW  
SUITE 200

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.6738

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

3000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8015.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

<b>A.</b> Full Name (Last, First, Middle Initial) WACHOVIA	<b>Transaction ID:</b> SB21B.6737 <b>Date of Disbursement</b>																				
Mailing Address 444 NORTH CAPITOL STREET, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	2		2	0	0	8												
City WASHINGTON State DC Zip Code 20001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Bank Charge Candidate Name	<table border="1"> <tr> <td colspan="10">1.00</td> </tr> </table>	1.00																			
1.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Wired for Change	<b>Transaction ID:</b> SB21B.6695 <b>Date of Disbursement</b>																				
Mailing Address 1700 Connecticut Ave., NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	8		2	0	0	8												
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Email Database Candidate Name	<table border="1"> <tr> <td colspan="10">4000.00</td> </tr> </table>	4000.00																			
4000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Yahoo Search	<b>Transaction ID:</b> SB21B.6697 <b>Date of Disbursement</b>																				
Mailing Address 701 First Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	8		2	0	0	8												
City Sunnyvale State CA Zip Code 94089	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Online Ads Candidate Name	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**4101.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

**A.**

Full Name (Last, First, Middle Initial)

Yahoo Search

Mailing Address 701 First Avenue

City Sunnyvale State CA Zip Code 94089

Purpose of Disbursement  
Online Ads

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.6717

Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Yahoo Search

Mailing Address 701 First Avenue

City Sunnyvale State CA Zip Code 94089

Purpose of Disbursement  
Online Ads

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.6731

Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

24370.30

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 33 / 39

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Absoute Pitch Studios, Inc.

Nature of Debt (Purpose):  
Radio Ad Production

Mailing Address 7101 Wisconsin Ave.  
SuiteLL01

City State ZIP Code  
Bethesda MD 20814

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6086

Amount Incurred This Period

1487.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

1487.50

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Laryn Bakker

Nature of Debt (Purpose):  
Strategic Consulting

Mailing Address 4909 LaSalle Rd

City State ZIP Code  
Hyattsville MD 20782

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6750

Amount Incurred This Period

555.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

555.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Suzette Caldwell

Nature of Debt (Purpose):  
Newspaper Advertisement

Mailing Address PO Box 130876

City State ZIP Code  
Spring TX 77393

Outstanding Balance Beginning This Period

4931.64

Transaction ID: SD10.4515

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4931.64

1) **SUBTOTALS** This Period This Page (optional).....

6974.14

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 34 / 39

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
pTV MediaNature of Debt (Purpose):  
Website Development

Mailing Address P.O. Box 65273

City State ZIP Code  
Washington DC 20035

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6752

Amount Incurred This Period

5045.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5045.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Salem Radio RepresentativesNature of Debt (Purpose):  
Radio Ads

Mailing Address 6400 N. Belt Line Road

City State ZIP Code  
Irving TX 75063

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6753

Amount Incurred This Period

1100.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1100.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Sandler, Reiff & Young, PCNature of Debt (Purpose):  
Legal ServicesMailing Address 300 M Street, SE  
Suite 1102City State ZIP Code  
Washington DC 20003

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6749

Amount Incurred This Period

1140.42

Payment This Period

0.00

Outstanding Balance at Close of This Period

1140.42

1) **SUBTOTALS** This Period This Page (optional).....

7285.42

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 35 / 39

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
MATTHEW 25 NETWORK

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Strother Duffy Strother

Nature of Debt (Purpose):  
Advertising Production

Mailing Address 7315 Wisconsin Avenue, NW

City State ZIP Code  
Bethesda MD 20814

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6744

Amount Incurred This Period

1156.06

Payment This Period

0.00

Outstanding Balance at Close of This Period

1156.06

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1156.06

2) **TOTALS** This Period (last page this line number only)..... ▶

15415.62

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

15415.62

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 36 / 39

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MATTHEW 25 NETWORK		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00449801</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Absoute Pitch Studios, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 7101 Wisconsin Ave. SuiteLL01		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">662.50</div>	
City State Zip Code Bethesda MD 20814		<b>Transaction ID:</b> SE.6084	
Purpose of Expenditure Ad Production		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">55478.56</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee Absoute Pitch Studios, Inc.		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 7101 Wisconsin Ave. SuiteLL01		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">825.00</div>	
City State Zip Code Bethesda MD 20814		<b>Transaction ID:</b> SE.6085	
Purpose of Expenditure Ad Production		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">55478.56</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 <b>[MEMO ITEM]</b>	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
MARA VANDERSLICE Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 37 / 39

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MATTHEW 25 NETWORK		FEC IDENTIFICATION NUMBER <b>C</b> C00449801	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Eleison Group		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 1665 North Fort Meyer; Suite 700		Amount 1821.42	
City State Zip Code Arlington VA 22209		Transaction ID: SE.6068	
Purpose of Expenditure Radio Ad Production		Office Sought: <input type="checkbox"/> House State: DC <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 51804.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Full Name (Last, First, Middle, Initial) of Payee Salem Radio Representatives		Date MM / DD / YYYY 10 / 21 / 2008	
Mailing Address 6400 N. Belt Line Road		Amount 6900.00	
City State Zip Code Irving TX 75063		Transaction ID: SE.6066	
Purpose of Expenditure Radio Advertising		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 49982.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		8721.42	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
MARA VANDERSLICE Signature		Date MM / DD / YYYY 12 / 04 / 2008	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 38 / 39

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MATTHEW 25 NETWORK		<b>FEC IDENTIFICATION NUMBER</b> <b>C</b> C00449801	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Salem Radio Representatives		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8	
Mailing Address 6400 N. Belt Line Road		Amount 3674.40	
City Irving State TX Zip Code 75063		<b>Transaction ID:</b> SE.6072	
Purpose of Expenditure Radio Advertising		Office Sought: <input type="checkbox"/> House State: DC <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 55478.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Full Name (Last, First, Middle, Initial) of Payee Salem Radio Representatives		Date M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 8	
Mailing Address 6400 N. Belt Line Road		Amount 1100.00	
City Irving State TX Zip Code 75063		<b>Transaction ID:</b> SE.6755	
Purpose of Expenditure Radio Advertising		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 55478.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....		3674.40	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....			
(c) <b>TOTAL</b> Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
MARA VANDERSLICE Signature		Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 39 / 39

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MATTHEW 25 NETWORK			<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00449801</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			<b>Date</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Full Name (Last, First, Middle, Initial) of Payee Strother Duffy Strother			<b>Amount</b> <div style="border: 1px solid black; padding: 2px; text-align: right;">1156.06</div>	
Mailing Address 7315 Wisconsin Avenue, NW			<b>Transaction ID:</b> SE.6748	
City Bethesda	State MD	Zip Code 20814	<b>Office Sought:</b> <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure Advertising Producti- on		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div>	<b>Check One:</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA			<b>Disbursement For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">55478.56</div> <div style="text-align: right; font-weight: bold; margin-top: 5px;">[MEMO ITEM]</div>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; width: 150px;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; height: 20px; width: 150px;"></div>
(c) <b>TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; width: 150px;">12395.82</div>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
MARA VANDERSLICE Signature	<b>Date</b> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 4</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>